

*Town of Maynard*

*Building Department*

*195 Main Street Maynard, MA 01754*



*Tel: (978) 897-0574*

*Fax: (978) 897-8457*

### Construction Control Occupancy Affidavit

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ before me,  
\_\_\_\_\_, a Notary Public duly  
commissioned and qualified for the Commonwealth of Massachusetts, personally appeared  
\_\_\_\_\_, who being sworn, deposes and  
says that he/she has supervised the construction of \_\_\_\_\_  
under permit# \_\_\_\_\_ and that this structure conforms to the submitted plans  
and to the Codes of the Town of Maynard and the Commonwealth.

Street Address

Further, that all required approvals and material affidavits have been submitted, and that  
there are no violations of law or orders of the Department of Public Safety pending.

I, as the affidavitted engineer and or architect hereby certify that I have on this date  
\_\_\_\_\_ inspected the property located at \_\_\_\_\_

Street Address

And find that the locus comply with my plans and specifications and all rules and  
regulations of the Codes of the Commonwealth.

Therefore, I request a Certificate of Occupancy for the above address.

\_\_\_\_\_  
Original Signature and seal

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires on \_\_\_\_\_